

Tc943

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A-S	943	9-19-1/12-04-01
RESPONSE FORMALITY REVIEW	CC	1114	03-0802

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
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Claim	Final Original	Date
61		7/12/03
62		5/16/03
63		10/20/03
64	N	C
65	✓	✓
66	N	O
67	o	O
68	o	✓
69	o	✓
70	✓	
71	✓	O
72	✓	O
73	o	O
74	o	O
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Claim	Final Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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